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MANUALLY EXECUTED

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FORM D	UNITED STATES	OMB APPROVAL
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB Number: 3235-0076
	3	Expires:
RECEIVED	FORM D	Estimated average burden hours perresponse16.00
MAR 6 2	NONCE OF SALE OF SECURITIES	SEC USE ONLY Produce Series
Miwie & ~	FURSUANT TO REGULATION D,	
The state of the s	SECTION 4(6), AND/OR	DATE RECEIVED
U _{OO} U	MFORM LIMITED OFFERING EXEMP	TION
	of amendment and name has changed, and indicate change.)	
	Internation the first firs	·
Filing Under (Check box(es) that apply): Type of Filing: New Filing A	Rule 504 Rule 505 Rule 506 Section 4(6)	TH OF
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about	t the issuer	
Name of Issuer (Check if this is an a	mendment and name has changed, and indicate change.)	- I CORRIN CONTROL CON
U.S. GOLD CORPORATION		06025980
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2201 KIPLING ST., SUITE 100 Address of Principal Business Operations	LAKEWOOD, CO 80125-1545 (Number and Street, City, State, Zip Code)	(303) 238-1438 Telephone Number (Including Area Code)
(If different from Executive Offices)	(radios and steet, City, State, 2.p Coue)	reseptione reunioes (including Area Code)
Exicf Description of Business	· · · · · · · · · · · · · · · · · · ·	
GOLD EX	PLORATION	PROCESSED
Type of Business Organization		
corporation		case specify): MAR 1 5 2006
business trust	limited partnership, to be formed	P; "" " 3 2000
	Month Year	THOMSON
Actual or Estimated Date of Incorporation		FINANCIAL FINANCIAL
Jurisdiction of Incorporation of Organizati	ion: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS		Delta
Federal; Who Must File: All issuers making an offer	ing of securities in reliance on an exemption under Regulation D or	Section 4(6) 17 CFR 230 501 et sea or 15 U.S.C.
77d(6).	118 At baantings in Minniae an oil availibilett filling 1728 aiftigil 15 pt	
When To File: A notice must be filed no l	ater than 15 days after the first sale of securities in the offering.	A notice is deemed filed with the U.S. Securities
	arlier of the date it is received by the SEC at the address given be	low or, if received at that address after the date on
	by United States registered or certified mail to that address.	
	inge Commission, 450 Fifth Street, N.W., Washington, D.C. 205	
photocopies of the manually signed copy of	,, ,	- ,
Information Required: A new filing must thereto, the information requested in Part C	contain all information requested. Amendments need only report, and any material changes from the information previously supplied.	the name of the issuer and offering, any changes ed in Parts A and B. Part E and the Appendix need
not be filed with the SEC. Filing Fee: There is no federal filing fee.		•
State: This notice shall be used to indicate relian	nce on the Uniform Limited Offering Exemption (ULOE) for sa	les of securities in those states that have adonted
ULOE and that have adopted this form.	Issuers relying on ULOE must file a separate notice with the Se	curities Administrator in each state where sales
are to be, or have been made. If a state i	requires the payment of a fee as a precondition to the claim for	the exemption, a fee in the proper amount shall
	be filed in the appropriate states in accordance with state law.	The Appendix to the notice constitutes a part of
this notice and must be completed.	1 marian 200	•
	ATTENTION	
appropriate federal notice will no	priate states will not result in a loss of the federal exist result in a loss of an available state exemption unles	
filing of a federal notice.	•	•

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

1 of 9



Each executive of:	vner having the pow ficer and director o		• • •		f a class of equity securities of the iss partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing.Partner
ull Name (Last name first, McEWEN, ROBERT RO	·				
Business or Residence Address George Street, 3rd F	•	• • • • •	ode)	· · · · · · · · · · · · · · · · · · ·	,
heck Box(es) that Apply:	Promoter	Beneficial Owner	. Executive Officer	Director	General and/or Managing Partner
uli Name (Last name first, CARPENTER, ANN S.	if individual)				
usiness or Residence Address 5445 Goldenrod Drive, I		•••	ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Z Executive Officer	Director	General and/or Managing Partner
uli Name (Last name first, PASS, WILLIAM F.	if individual)				
susiness or Residence Address or State Place, Go	<u>-</u>		ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
uil Name (Last name first, ASHBY, MICHELE L.	If individual)			· · · · · ·	
usiness or Residence Addr			ode)		
ZOJO MBUISON STIERI, L	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
2635 Madison Street, E theck Box(es) that Apply:	Ti venere			•	Managing Partner
				·	Managrig Faction
theck Box(es) that Apply: "Ull Name (Last name first, BAKER, LEANNE M. Business or Residence Adde	if individual)	Street, City, State, Zip C	Code)		Managang Factor
heck Box(es) that Apply:	if individual)	Street, City, State, Zip C	ode) Executive Officer	Director	General and/or Managing Partner
theck Box(es) that Apply: ull Name (Last name first, BAKER, LEANNE M. usiness or Residence Addr P.O. Box 1366 Tiburon theck Box(es) that Apply:	if individual) ress (Number and n, CA 94920 Promoter			☑ Director	☐ General and/or
theck Box(es) that Apply: uil Name (Last name first, BAKER, LEANNE M. lusiness or Residence Addr P.O. Box 1366 Tiburon theck Box(es) that Apply: full Name (Last name first, MAURO, RICHARD	if individual) ress (Number and n, CA 94920 Promoter if individual)	Beneficial Owner Beneficial Owner	Executive Officer	Director	☐ General and/or
theck Box(es) that Apply: ull Name (Last name first, BAKER, LEANNE M. lusiness or Residence Addr P.O. Box 1366 Tiburon theck Box(es) that Apply: full Name (Last name first, MAURO, RICHARD dusiness or Residence Addr	if individual) ress (Number and n, CA 94920 Promoter if individual)	Beneficial Owner Beneficial Owner	Executive Officer	Director Director	☐ General and/or

U.S. GOLD CORPORATION

A. BASIC IDENTIFICATION DATA

☑ Director

Name:

COSTELLO, DECLAN J.

Address:

2994 Routt Circle Lakewood, CO 8015

☑ Beneficial Owner

Name:

NOVAGOLD RESOURCES, INC.

Address:

P.O. Box 24, Suite 2300, 200 Granville Street Vancouver A1 V6C 1S4

				, B. D	VFORMAT)	ON ABOU	t offeri	NG				
. Has the	issuer sold	i, or does th	e issuer in	itend to set	L to non-n	ccredited 2	nverer !-	this area-	no?		Yes	No
									•			×
. What is	the mini-	um inusat=			Appendix,						4.5	00.00
. What is	What is the minimum investment that will be accepted from any individual?									3 <u> </u>		
. Does th	Does the offering permit joint ownership of a single unit?							Yes R	No □			
Enter th	ne informat	ion request	ed for eac	h person w	ho has bee	n or will t	e paid or	given, dire	ctly or ind	irectly, any	_	
If a person state	son to be lis s, list the ne	ilar remune ted is an ass ame of the b you may s	ociated pe	rson or age alor. If mo	nt of a brok ore than five	et or deale : (5) persor	r registered as to be list	l with the S ed are asso	EC and/or	with a state		
ull Name (3MP Secu		first, if indi	vidual)									
usiness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
		1100 Toro			-							
lame of As	sociated Br	oker or De	aler									
Integ 2- 35F	List Dans	1 404 - 3 77	Cattain	an Interview	44 O-17-1-1							
		Listed Has										l Carterio
Check	VII States	" or check) AUDIVIDNE	olaics)	****************			************			□ vi	States
AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	H	ID
	M	TA	KS	KY	LA	MB	MD	MA	MI	MN	MS	MO
MT	NE	N♥	(ZH)	D)	NM	NAX.	NC	(<u>DD</u>	QH.	OK	OR	PA
RI	SC	SD	TN	TX	UT]	(VT)	(VA)	WA	WV	WI	WY	PR
	Last name Burney Co	first, if indi	ividual)									
		: Address (1 9 1100 Tor				Zip Code)						
lame of As	sociated B	roker or De	aler									
tates in W	hich Persor	Listed Ha	Solicited	or intends	to Solicit	Purchasers				•••		
(Check	"All State:	s" or check	individual	States)	************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· •••••••••	************	☐ Al	l States
AL	AK	A2	AR	CA	CO	CT	DE	DC	FL	GA	H	ID
T	IN	IA	[KS]	KY	LA	ME	MD	MA	MU	MN	MS	MO
MT	NE	NV	NH	TAT.	MM	NYY)	NC	ND	QA)	OK	OR	PA
RI	SC	SD	TN	(VX)	UT	VT	VA	WA	WV		WY	PR
ull Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)		_				
Jame of A	tencipted D	roker ar De	aler				···					
											_	
States in W	hich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Cheel	c"All State	s" or check	individua	States)		· · · · · · · · · · · · · · · · · · · ·					☐ A	l States
AL	AK	AZ	AR	CA	<u>[CO]</u>	CT	DE	[DC]	FL	GA	HI	ID
	מו	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	HM	(K)	NM	NY	NC	ND	OH	OK	OR	PA
RT	SC	SD	TN	TX	UT	∇T	VÁ	WA	WV	WI	$\overline{\mathbf{WY}}$	PR

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	ROCKEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	2	2
	Equity		
	√ Common ☐ Preferred		
	Convertible Securities (including warrants)	75,150,000.00	75,150,000.00
٠	Partnership Interests	\$	\$
	Other (Specify)		
	Total	75,150,000.00	\$ 75,150,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	Y	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		± 11,472,637.50
	Non-accredited Investors		<u> </u>
	Total (for filings under Rule 504 only)		\$
			3
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		s
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s_4,500.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees	_	\$ 800,000.00
	Accounting Fees		\$ 0.00
٠,	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 5,260,000.00
	Other Expenses (identify)	<u>د</u>	\$
	Total		\$ 6,064,500.00
		,	

* Includes " accredited investors", under pedevantriprovisions of Canadian federal and provinceal law

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gros			g 69	,085,00*
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ly purpose is not known, furnish an estimate an fthe payments listed must equal the adjusted gros	d			
				Payments to Officers, Directors, & Affiliates	P	ayments to Others
	Salaries and fees (2 executives over	2 years)	. 🔽	\$ 570,000.00	□ \$.	
	Purchase of real estate		· 🗖	<u> </u>	\$_	
	Purchase, rental or leasing and installation of made	chinery	_			*
	and equipment		_		_	
	Construction or leasing of plant buildings and fac		•	2	□ 2.	
	Acquisition of other businesses (including the val offering that may be used in exchange for the assi issuer pursuant to a merger)	ets or securities of another		\$	□ \$	
	Repayment of indebtedness		_		_	
	Working capital		. L.	2	☐ * -	36,915,500.00
	Other (specify): Property exploration					
	Property reclamatio	n (over 1 year)	. 🗆	2	Z]\$	1,600,000.00
	Column Totals					
	Total Payments Listed (column totals added)	***************************************		☐ \$ <u>69</u>	,085,	500.00
		DPDERIESIGNATURE (1.5)			To.	
ខ្លាំខ្ល	te issuer has duly caused this notice to be signed by the grature constitutes an undertaking by the issuer to fue information furnished by the issuer to any non-act	rnish to the U.S. Seeurities and Exchange Comm	issi	on, upon writte	le 505. n requ	, the following est of its staff,
โรร	suer (Print or Type)	Signature	Di			
	U.S. Gold Corporation	~	<u> </u>	3/1/0	۷_	
NE	ame of Signer (Print or Type)	Title of Signer (Print or Type)			-	-
	Milliam Pass	Vice President				

- ATTENTION

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ı,	Is any party described in 17 CFR 230.262			Yes	No
	provisions of such rule?		***************************************		
	!	See Appendix, Column 5, for state respo	onsc.		
2,	The undersigned issuer hereby undertakes D (17 CFR 239,500) at such times as requ		y state in which this notice is	filed a no	itice on Form
3.	The undersigned issuer hereby undertake issuer to offerees.	s to furnish to the state administrators, t	ipon written request, informa	tion furr	nished by the
4 .	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of estab	e state in which this notice is filed and u	nderstands that the issuer clai		
	er has read this notification and knows the co thorized person,	ontents to be true and has duly caused this	natice to be signed an its beha	lf by the	undersigned
lasuer (Print or Type)	Signature	Date		
U.S.	. Gold Corporation		- 3/1/06	•	
Name (1	Print or Type)	Title (Print or Type)			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
ţ	Intend to non-ac investors (Part B	to sell coredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR						·			
CA									
со								Ī	
СТ				,					
DE			:				·		
DC									
FL		HI. 1 19					· · · · · · · · · · · · · · · · · · ·		
GA								!	ſ
HI									
ID					,				
IL									
IN									
IA.									F-1
KS									
KY									
LA									1
ME									
MD									
MA		X	Subcription \$2,925,000	Receipt 2	\$2,925,	000			X
MI			72,523,000						
MN	 								
MS	<u> </u>							,	

				APPI	ENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					fication te ULOE attach ition of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ							-		
NE			,						
NV									Γ.
NH									
NJ		X	Subcription Receipt	1	\$1,003,	000			X
NM			\$1,003,000						
ΝΥ		X	Subcription Receipt	5	\$5,258.	137	-		
NC			\$5,258,137			·			
ND	1								
ОН		x	Subcription Receipt	11	\$495,00	D			🗶
ОК		. p. 1984. 1 (14) 14	\$495,000						<u></u>
OR									
PA									
RI									
sc	b. e., , ,								
SD									ſ <u>.</u> ,
TN				,					
TX		х	Subcription Receipt	1	\$787,50	b -			X
UT			\$787,500						
VT									
VA									
WA				·					
wv									
ıw		x	Subscription Receipt \$1,003,500	1	\$1,003	,000			x .

1	to non-a	ors in State offered in state amou				f investor and rchased in State C-Item 2)	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									